

Atty. Dkt. No.: PREC-1-15319

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Whan-Tong et al.  
Title: CROSSTRaining EXERCISE  
DEVICE  
Appl. No.: 09/711,740  
Filing Date: 13 November 2000  
Examiner: Stephen R. Crow  
Art Unit: 3764

**CERTIFICATE OF EXPRESS MAILING**  
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Arlington, VA 22313-1450.

ED 086771896 US

October 18, 2004

(Express Mail Label Number)

(Date of Deposit)

Terence P. O'Brien

(Printed Name)

  
(Signature)

**AMENDMENT TRANSMITTAL**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☒ [ X ] Power of Attorney and Correspondence Address Indication Form PTO/SB/81 (1 Page).
- ☒ [ X ] Statement Under 37 CFR 3.73(b), Form PTO/SB/96 (1 Page).
- ☒ [ X ] Reply to Office Action dated June 18, 2004 (12 pages).
- ☒ [ X ] Postcard.
- ☒ [ X ] The fee required for additional claims is calculated below.

**RECEIVED**  
**OCT 25 2004**  
TECHNOLOGY CENTER R3700

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Add'l Claim Fees
Total Claims:	20	- 13	= 0	x \$18.00	= \$ 0.00
Independents:	5	- 5	= 0	x \$86.00	= \$ 0.00
First Presentation of Any Multiple Dependent				+ \$290.00	= \$ 0.00
CLAIMS FEE TOTAL					= \$ 0.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input checked="" type="checkbox"/>	Extension for response filed within the first month:	\$ 110.00	\$ 110.00
<input type="checkbox"/>	Extension for response filed within the second month:	\$ 430.00	\$0.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$ 980.00	\$0.00
EXTENSION FEE TOTAL:			\$110.00
CLAIMS AND EXTENSION FEE TOTAL:			\$110.00
TOTAL FEE:			\$110.00

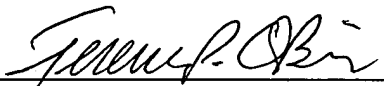
☒ Please charge Deposit Account No. 501959 in the amount of \$110.00.

☐ A check in the amount of \$0.00 is enclosed.

☒ Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 501959. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 501959.

Respectfully submitted,

Date 18 October 2004  
Precor Incorporated  
Amer Sports North America  
8700 W. Bryn Mawr Avenue  
Chicago, IL 60631

By   
Terence P. O'Brien  
Attorney for Applicants  
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